

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

LIFEPOINT HOSPITALS INC GOOD GOVERNMENT FUND

ADDRESS (number and street)

103 POWELL COURT SUITE 200

☐Check if different
than previously
reported. (ACC)

BRENTWOOD

TN

37027

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIPCODE

C00347955

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☒

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

06

01

2008

through

06

30

2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Penny Brake

Signature of Treasurer

Electronically Filed by Penny Brake

Date

07

14

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

LIFEPOINT HOSPITALS INC GOOD GOVERNMENT FUND

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	6	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	6	3	0	2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2008		18034.00
(b) Cash on Hand at Beginning of Reporting Period	96598.77	
(c) Total Receipts (from Line 19)	6600.00	131012.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	103198.77	149046.00
7. Total Disbursements (from Line 31)	8000.00	53847.23
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	95198.77	95198.77
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

LIFEPOINT HOSPITALS INC GOOD GOVERNMENT FUND

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	6	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	6	3	0	2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	2500.00	117688.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	100.00	9324.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➡	2600.00	127012.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ➡	2600.00	127012.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	4000.00	4000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	6600.00	131012.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	6600.00	131012.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	150.23
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	0.00	150.23
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5500.00	43250.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	500.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	500.00
29. Other Disbursements.....	2500.00	9947.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	8000.00	53847.23
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8000.00	53847.23

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	2600.00	127012.00
34. Total Contribution Refunds (from Line 28(d))	0.00	500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2600.00	126512.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	150.23
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	150.23

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 10

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LIFEPOINT HOSPITALS INC GOOD GOVERNMENT FUND

A.

Full Name (Last, First, Middle Initial)

David Dill

Mailing Address 103 Powell Ct, Ste 200

City

Brentwood

State

TN

Zip Code

37027

FEC ID number of contributing
federal political committee.

C

Name of Employer
LifePoint Hospitals

Occupation

CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.6938

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

2500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 10

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☒ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIFEPOINT HOSPITALS INC GOOD GOVERNMENT FUND

A.

Full Name (Last, First, Middle Initial)

MCCONNELL SENATE COMMITTEE '08

Mailing Address PO BOX 1496

City

LOUISVILLE

State

KY

Zip Code

40201

FEC ID number of contributing
federal political committee.

C C00193342

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 3 / 2 0 0 8

Transaction ID: SA16.6940

Amount of Each Receipt this Period

4000.00

refund of contribution

SUBTOTAL of Receipts This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

4000.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 8 / 10

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

LIFEPOINT HOSPITALS INC GOOD GOVERNMENT FUND

A.

Full Name (Last, First, Middle Initial)

DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 South Capitol Street, SE
2nd Floor

City Washington State DC Zip Code 20003

Purpose of Disbursement
fundraiser

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.6948

Date of Disbursement

06 / 12 / 2008

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

GOODE FOR CONGRESS

Mailing Address 235 South Main Street

City Rocky Mount State VA Zip Code 24151

Purpose of Disbursement
fundraiser

Candidate Name
GOODE FOR CONGRESS

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: VA District: 05

Transaction ID: SB23.6942

Date of Disbursement

06 / 05 / 2008

Amount of Each Disbursement this Period

500.00

C.

Full Name (Last, First, Middle Initial)

MATHESON FOR CONGRESS

Mailing Address 677 SOUTH 200 WEST SUITE A

City SALT LAKE CITY State UT Zip Code 84101

Purpose of Disbursement
fundraiser

Candidate Name
MATHESON FOR CONGRESS

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: UT District: 02

Transaction ID: SB23.6947

Date of Disbursement

06 / 12 / 2008

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 9 / 10

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIFEPOINT HOSPITALS INC GOOD GOVERNMENT FUND

A.

Full Name (Last, First, Middle Initial)

SALAZAR FOR SENATE

Mailing Address PO BOX 600

City
DENVERState
COZip Code
80201Purpose of Disbursement
fundraiserCandidate Name
SALAZAR FOR SENATECategory/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: CO District: 00

Transaction ID: SB23.6955

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	0	8

Amount of Each Disbursement this Period

2000.00

B.

Full Name (Last, First, Middle Initial)

Thayer for Senate

Mailing Address 102 Grayson Way

City
GeorgetownState
KYZip Code
40324Purpose of Disbursement
fundraiserCandidate Name
Thayer for SenateCategory/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: KY District: 17

Transaction ID: SB23.6954

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	0	8

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

5500.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 10 / 10

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

LIFEPOINT HOSPITALS INC GOOD GOVERNMENT FUND

A.

Full Name (Last, First, Middle Initial)

CHA/AHA PAC

Mailing Address 7335 E Orchard Road #100

City Greenwood Village State CO Zip Code 80111

Purpose of Disbursement
PAC assessment

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB29.6952

Date of Disbursement

06 / 12 / 2008

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Mark Raymond Campaign

Mailing Address 151 West 200 North

City Vernal State UT Zip Code 84078

Purpose of Disbursement
contribution

Candidate Name
Mark Raymond Campaign

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: UT District:

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB29.6944

Date of Disbursement

06 / 05 / 2008

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Utah HOSPAC

Mailing Address 2180 South 1300 East Suite 440

City Salt Lake City State UT Zip Code 84106

Purpose of Disbursement
PAC assessment

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB29.6957

Date of Disbursement

06 / 23 / 2008

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

2500.00